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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Marilyn Gra	ice fullyma	ade, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on o Liability Company)	<u>ur records.</u>)		
amending name, enter the new name of the limited liability company here: The name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." The new principal offices address. if applicable: It is provided address and the street address of the new registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Torida Tip Code				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liah	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designa	ion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		<u></u>		
(Principal office address MUST BE A STREET ADDRESS)				
				
Enter new mailing address, if applicable:		73) emin		
(Mailing address MAY BE A POST OFFICE BOX)				
		i ne		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	s, <u>enter the name of the new registered</u>		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida str	eet address		
	City	, Florida Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	•	•		
	- ree to act in this capac			

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Marilyn Palaci	9318 SW 91 AVE	_ tEAdd
	1 '	6318 SW 91 AVE Micimi, Fl 33165	□Remove
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f amending any oth	er information, en	iter change(s) here: (Attac	ch additional sheets, if necess	sary.)	
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Effective date, if oth fan effective date is listen Note: If the date inser document's effective d	ted in this block doe	s not meet the applicable state	(option filling or more than 90 days after fi utory filing requirements, this o	1 al) lling.) Pursuant to 60 date will not be lis	05.0207 sted as
record specifies a del d is filed.	ayed effective date, b	out not an effective time, at 1.	2:01 a.m. on the earlier of: (b)		er the
Dated April	33	<u> 3033</u> .		2023 APR	-
	mo	rus Pal	aci	: 55 —	1727
	Signatu	re of a member or authorized rep	resentative of a member		i
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